

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 16/593728	FILING DATE					
CLAIMS							APPLICANT(S)						
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1	1				52						
3		1	1				53						
4		1	1				54						
5		1	1				55						
6		1	1				56						
7		1	1				57						
8		1	1				58						
9		1	1				59						
10		1	1				60						
11		1	1				61						
12		1	1				62						
13		1	1				63						
14		1	1				64						
15		1	1				65						
16		1	1				66						
17		1	1				67						
18		1	1				68						
19			1				69						
20			1				70						
21			1				71						
22				1			72						
23				1			73						
24				1			74						
25				1			75						
26				1			76						
27				1			77						
28				1			78						
29				1			79						
30				1			80						
31				1			81						
32				1			82						
33				1			83						
34				1			84						
35				1			85						
36				1			86						
37				1			87						
38				1			88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓	1	↓		↓	TOTAL IND.	↓		↓		↓	
TOTAL DEP.	17	←	17	←		←	TOTAL DEP.	←		←		←	
TOTAL CLAIMS	18		18				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

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